2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000104385

Entity Name: KOMA LLC

Address:

City-St-Zip:

FILED Apr 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 615 SAINT JUDES DRIVE N LONGBOAT KEY, FL 34228 **Current Mailing Address: New Mailing Address:** 615 SAINT JUDES DRIVE N LONGBOAT KEY, FL 34228 FEI Number: 26-3686201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MURAI, SAM 615 SAÎNT JUDES DRIVE N US LONGBOAT KEY, FL 34228 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MURAI, SAM Name: Name: Address: 615 SAINT JUDES DRIVE N Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: Title: () Delete Title: MGRM () Change (X) Addition Name: Name: MURAI, AKEMI

Address:

City-St-Zip:

615 SAINT JUDES DRIVE N

LONGBOAT KEY, FL 34228

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SAM MURAI MGRM 04/03/2009